



Commonwealth
of Massachusetts

Center for Health
Information and Analysis

All Payer Claims Database Data Volume Reports

2008 - 2012

March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: CHIA-APCD@state.ma.us.

Thank you for your interest in the All Payer Claims Database.

Commonwealth of Massachusetts-Center for Health Information and Analysis (CHIA)
APCD Data Volume Reports 2008-2012 (based on data received by 12/19/2012)

Harvard Pilgrim Health Care														
File Type*	Submission Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	858	858
PR	2011	0	0	892	0	928	936	0	0	972	0	0	988	4716
PR	2012	0	0	1,069	0	0	1,130	0	0	1,244				3443
ME	2009	0	0	0	0	0	0	0	0	0	0	0	1,314,104	1314104
ME	2010	0	0	0	0	0	0	0	0	0	0	0	1,394,509	1394509
ME	2011	1,440,000	1,510,230	1,498,491	1,507,809	1,525,781	1,467,058	1,565,203	1,578,140	1,582,546	1,596,619	1,603,570	1,519,642	18,395,089
ME	2012	1,580,030	1,577,159	1,568,060	1,576,565	1,576,738	1,500,084	1,658,237	1,660,052	1,674,173	1,687,713	1,722,151		17,780,962
PV	2011	341,044	344,672	352,005	356,450	361,458	366,507	370,522	375,236	379,116	383,195	387,382	396,757	4,414,344
PV	2012	400,535	405,793	409,438	413,522	418,234	423,651	427,053	431,026	435,949	442,665	446,898		4,654,764
MC	2008	39,494	1,106,541	1,466,697	1,949,784	1,552,960	1,534,907	1,960,523	1,568,793	2,006,698	1,643,298	1,657,550	2,106,525	18,593,770
MC	2009	1,502,634	1,615,440	2,064,370	1,739,888	1,652,172	1,965,838	1,721,895	1,616,914	1,995,508	1,711,138	1,761,493	2,159,551	21,506,841
MC	2010	1,640,944	1,701,523	2,195,885	1,783,014	1,736,507	2,143,050	1,842,384	2,145,797	1,917,029	2,036,791	2,548,277	1,795,866	23,487,067
MC	2011	1,518,698	1,656,428	2,230,471	1,854,193	2,205,977	1,748,150	1,709,053	2,138,388	1,678,825	1,776,463	2,293,865	1,820,949	22,631,460
MC	2012	1,820,568	2,105,162	1,909,023	1,959,034	2,325,983	1,755,360	2,137,297	1,799,393	1,767,459	2,319,178			19,898,457
PC	2008	312,488	680,836	511,391	515,890	557,612	677,814	564,370	522,908	533,772	539,111	493,261	616,718	6,526,171
PC	2009	514,762	514,383	549,799	595,712	552,298	515,122	578,068	534,258	507,590	608,181	452,574	646,249	6,568,996
PC	2010	610,701	436,678	661,583	617,627	535,252	591,209	584,577	554,001	520,838	594,811	594,573	535,267	6,837,117
PC	2011	584,319	586,898	541,243	530,963	673,209	519,442	621,655	495,262	517,483	644,129	521,216	553,217	6,789,036
PC	2012	644,538	523,476	521,848	641,710	516,345	510,616	628,361	501,440	633,060	523,047	507,025		6,151,466
DC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2012	0	0	0	0	0	0	0	0	0	0	0	0	0

***Key:** PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:

- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.









